

SERFF Tracking Number: AETN-128120822 State: Arkansas  
Filing Company: Genworth Life and Annuity Insurance Company State Tracking Number:  
Company Tracking Number: MEDICARE SUPPLEMENT MULTIPLE POLICIES REPORT  
TOI: MS09 Medicare Supplement - Other 2010 Sub-TOI: MS09.000 Medicare Supplement Other 2010  
Product Name: Medicare Supplement  
Project Name/Number: Medicare Supplement Multiple Policy Report/

## Filing at a Glance

Company: Genworth Life and Annuity Insurance Company

Product Name: Medicare Supplement SERFF Tr Num: AETN-128120822 State: Arkansas

TOI: MS09 Medicare Supplement - Other 2010 SERFF Status: Closed-Accepted State Tr Num:  
For Informational Purposes

Sub-TOI: MS09.000 Medicare Supplement Co Tr Num: MEDICARE State Status: Filed-Closed  
Other 2010 SUPPLEMENT MULTIPLE  
POLICIES REPORT

Filing Type: Form

Reviewer(s): Stephanie Fowler  
Disposition Date: 02/28/2012  
Authors: Mary Ann Pyle, Lori Rodman  
Date Submitted: 02/27/2012 Disposition Status: Accepted For  
Informational Purposes

Implementation Date Requested: On Approval

State Filing Description:

Implementation Date:

## General Information

Project Name: Medicare Supplement Multiple Policy Report

Project Number:

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Filing Status Changed: 02/28/2012

State Status Changed: 02/28/2012

Deemer Date:

Created By: Mary Ann Pyle

Submitted By: Lori Rodman

Corresponding Filing Tracking Number:

Filing Description:

The purpose of filing is to submit the Form for Reporting Medicare Supplement Multiple Policies for calendar year 2011.

## Company and Contact

### Filing Contact Information

Lori Rodman, Compliance Consultant  
101 Continental Place

RodmanL@Aetna.com  
615-373-0272 [Phone]

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Brentwood, TN 37027

### Filing Company Information

Genworth Life and Annuity Insurance Company CoCode: 65536 State of Domicile: Virginia  
6620 W Broad Street Group Code: Company Type:  
Richmond, VA 23230 Group Name: State ID Number:  
(804) 281-6600 ext. [Phone] FEIN Number: 54-0283385  
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### Filing Fees

Fee Required? No  
Retaliatory? No  
Fee Explanation:  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Genworth Life and Annuity Insurance Company	\$0.00	02/27/2012	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	02/28/2012	02/28/2012

*SERFF Tracking Number:*      *AETN-128120822*      *State:*      *Arkansas*  
*Filing Company:*      *Genworth Life and Annuity Insurance Company*      *State Tracking Number:*  
*Company Tracking Number:*      *MEDICARE SUPPLEMENT MULTIPLE POLICIES REPORT*  
*TOI:*      *MS09 Medicare Supplement - Other 2010*      *Sub-TOI:*      *MS09.000 Medicare Supplement Other 2010*  
*Product Name:*      *Medicare Supplement*  
*Project Name/Number:*      *Medicare Supplement Multiple Policy Report/*

## **Disposition**

Disposition Date: 02/28/2012

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		Yes
Supporting Document	Outline of Coverage		Yes
Form	Medicare Supplement Multiple Policy Report	Accepted for Informational Purposes	Yes

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## Form Schedule

### Lead Form Number:

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Accepted for Information al Purposes 02/28/2012	n/a	Other	Medicare Supplement Multiple Policy Report	Initial			GLAC AR_Copyof Multiple_Policy_report_2011.pdf

## FORM FOR REPORTING MEDICARE SUPPLEMENT POLICIES

NAIC Number: 65536

Company Name: Genworth Life and Annuity Insurance Company

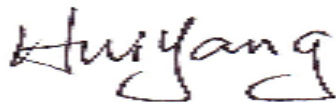
Address: P.O. Box 1188      Brentwood      Tennessee      37024

Phone Number: 804-281-6059

State: ARKANSAS  
(Due March 1, annually)

The purpose of this form is to report the following information on each resident of this state who has in force more than one Medicare supplement policy or certificate. The information is to be grouped by individual policyholder.

Policy and Certificate	Date of Issue
No policyholder has multiple Medicare supplement policies	



Signature

Hui Yang / Actuary I, ASA, MAAA  
Name and Title

2/21/2012  
Date

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## Supporting Document Schedules

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Flesch Certification		
<b>Bypass Reason:</b> The specified Supporting Documentation is not applicable to this filing. The filing is for Reporting of Medicare Supplement Multiple policies.		
<b>Comments:</b>		

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Application		
<b>Bypass Reason:</b> The specified Supporting Documentation is not applicable to this filing. The filing is for Reporting of Medicare Supplement Multiple policies.		
<b>Comments:</b>		

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Health - Actuarial Justification		
<b>Bypass Reason:</b> The specified Supporting Documentation is not applicable to this filing. The filing is for Reporting of Medicare Supplement Multiple policies.		
<b>Comments:</b>		

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Outline of Coverage		
<b>Bypass Reason:</b> The specified Supporting Documentation is not applicable to this filing. The filing is for Reporting of Medicare Supplement Multiple policies.		
<b>Comments:</b>		